## PROCESSED

APR 2 2 2008 THOMSON FINANCIAL

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPRO	DVAL
OMB Number:	3235-0076
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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	Segliau
Convertible Promissory Note and Warrant Offering	<u> </u>
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment	APR 142008
	Washington De
A, BASIC IDENTIFICATION DATA	112
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
BrightDoor Systems, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephoi	ne Number (Including Area Code)
6501 Weston Parkway, Suite 320, Cary, NC 27513 (919) 678-	-9940
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	one Number (Including Area Code)
Brief Description of Business	
Developing and marketing software and web-based software applications for customer relationship marketing for use in the real estate industry and providing complementary consulting services.	nagement, sales and
Type of Business Organization	
corporation [ ] limited partnership, already formed [ ] other (please specification)	an equilibri
business trust Iimited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization: O 3 O 7 Actual Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	08046704

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer ✓ Director General and/or Managing Partner Full Name (Last name first, if individual) Spear, Deven K. Business or Residence Address (Number and Street, City, State, Zip Code) c/o BrightDoor Systems, Inc., 6501 Weston Parkway, Suite 320, Cary, NC 27513 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Worthington, Michael C. Business or Residence Address (Number and Street, City, State, Zip Code) c/o BrightDoor Systems, Inc., 6501 Weston Parkway, Suite 320, Cary, NC 27513 Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Harrison, Sean R. Business or Residence Address (Number and Street, City, State, Zip Code) c/o BrightDoor Systems, Inc., 6501 Weston Parkway, Suite 320, Cary, NC 27513 Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) WWC Capital Fund II, LP Business or Residence Address (Number and Street, City, State, Zip Code) 11911 Freedom Drive, Suite 1010, Rston, VA 20190 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) IDEA Fund I L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 4505 Emperor Blvd., Suite 130, Durham, NC 27703 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Cromwell, Michael J., III Business or Residence Address (Number and Street, City, State, Zip Code) c/o WWC Capital Fund II, LP, 11911 Freedom Drive, Suite 1010, Rston, VA 20190 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Cambier, John

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code) c/o IDEA Fund I L.P., 4505 Emperor Blvd., Suite 130, Durham, NC 27703

A BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter General and/or ☐ Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Wingo, Scot Business or Residence Address (Number and Street, City, State, Zip Code) c/o ChannelAdvisor, 2701 Aerial Center Park, Morrisville, NC 27560 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(cs) that Apply: General and/or Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Executive Officer Director Promoter Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. II	NFORMAT	ION ABOU	T OFFERI	NG				
1. Has	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No <b>™</b>				
	Answer also in Appendix, Column 2, if filing under ULOE.						_	_					
2. Wha	. What is the minimum investment that will be accepted from any individual?								\$_3,000.00				
3. Does	Does the offering permit joint ownership of a single unit?							Yes <b>R</b>	No				
4. Ente comi If a p										_			
Full Nam	ıc (Last 1	name f	irst, if indi	ividual)			, , , , , , , , , , , , , , , , , , , ,						
Business	or Resid	lence /	Address (N	lumber and	d Street, C	ity, State, Z	(ip Code)						
Name of	Associat	ed Bro	oker or De	aler	• •	<del></del>			<del> </del>		<del>-</del>		
States in	Which P	erson	Listed Has	s Solicited	or Intends	to Solicit	Purchasers	<del></del>	<u> </u>				
												□ AI	l States
AL IL MT RI	<u>П</u>	N	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS ÖR WY	MO PA PR
Full Nam	ie (Last r	name f	irst, if indi	ividual)			o <u>-</u>						
Business	or Resi	dence	Address (1	Number an	d Street, C	City, State,	Zip Code)				- <u></u> -		<del></del>
Name of	Associat	ed Bro	oker or De	aler	<del> </del>		<del></del>						
States in	Which P	crson	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
(Che	ck "All	States'	" or check	individual	States)				· · · · · · · · · · · · · · · · · · ·	****************		☐ All States	
AL IL MT RI	] [ <u>]</u> ]	N E	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Nam	ic (Last r	name f	irst, if indi	ividual)									
Business	or Resi	dence	Address (?	Number an	d Street, C	City, State,	Zip Code)			<del></del>			
Name of Associated Broker or Dealer													
States in	Which P	erson	Listed Has	s Solicited	or Intends	to Solicit	Purchasers		<u></u>		<u> </u>		
(Check "All States" or check individual States)													
AL IL MT RI	) [I]   [N	N E	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u>s</u>	s
	Equity		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	750,000.00	300,000.00 \$
	Partnership Interests		\$
	Other (Specify)	<u> </u>	
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		· •
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	<del>,.</del>	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<b>\$</b>
	Printing and Engraving Costs		\$
	Legal Fees		\$_15,000.00
	Accounting Fees		_
	Engineering Fees	_	
	Sales Commissions (specify finders' fees separately)	_	
	Other Expenses (identify)	_	\$
	Total	<del>-</del>	\$ 15,000.00

	C. OFFERING I RICE, NOME	BER OF HAVESTORS, EATENSES AND USE OF I	NOCEEDS			
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."			\$_735000		
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross				
			Payments to Officers, Directors, & Affiliates	Payments to Others		
	Salaries and fees					
	Purchase of real estate		<b>\$</b>	<b>\$</b>		
	Purchase, rental or leasing and installation of mac and equipment		¬ ¢	<b>⊢ €</b>		
	Construction or leasing of plant buildings and fac	-		_		
		·	_] ³	□ •		
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	–ე დ			
	Repayment of indebtedness	•		_		
		<del>-</del>		_		
	Working capital					
	Other (specify):					
			<b></b> \$			
	Column Totals		\$ <u>0</u>	§ 735000		
	Total Payments Listed (column totals added)	ments Listed (column totals added)				
		D. FEDERAL SIGNATURE				
ig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accu	nish to the U.S. Securities and Exchange Commis	sion, upon writte			
SS	uer (Print or Type)	Signature	Date			
3ri	ghtDoor Systems, Inc.	1 2 1 1 1	April 9, 2008			
۷ai	me of Signer (Print or Type)	Title of Signer (Print of Type)				
Se	an R. Harrison	Secretary				

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)